

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Jackson Metropolitan Housing Authority
Small PHA Plan Update
Annual Plan for Fiscal Year: **2001**

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan
Agency Identification**

PHA Name: Jackson Metropolitan Housing Authority

PHA Number: OH040

PHA Fiscal Year Beginning: (mm/yyyy) 10/2001

PHA Plan Contact Information:

Name: Gary Keller

Phone: (740) 384-5627

TDD: (800) 750-0750

Email (if available):

Public Access to Information

**Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)**

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered:

☒ Public Housing and Section 8 ☐ Section 8 Only ☐ Public Housing Only

Annual PHA Plan
Fiscal Year 2001
[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Contents	<u>Page #</u>
Annual Plan	
i. Executive Summary (optional)	
ii. Annual Plan Information	
iii. Table of Contents	
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	2
2. Capital Improvement Needs	2
3. Demolition and Disposition	3
4. Homeownership: Voucher Homeownership Program	4
5. Crime and Safety: PHDEP Plan	4
6. Other Information:	
A. Resident Advisory Board Consultation Process	4
B. Statement of Consistency with Consolidated Plan	5
C. Criteria for Substantial Deviations and Significant Amendments	6
Attachments	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	
<input checked="" type="checkbox"/> Attachment B: Capital Fund Program Annual Statement	
<input checked="" type="checkbox"/> Attachment B: Capital Fund Program 5 Year Action Plan	
<input type="checkbox"/> Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment F: Resident Membership on PHA Board or Governing Body	
<input checked="" type="checkbox"/> Attachment G: Membership of Resident Advisory Board or Boards	
<input checked="" type="checkbox"/> Attachment C: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
Attachment D: Performance and Evaluation Report 908-99	
Attachment E: Performance and Evaluation Report 501-00	

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

This Section is left blank since it is optional.

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

We have made numerous changes to our policies and/or programs based on changes in statutes and/or HUD regulations that have occurred in the past year. HUD mandated all of these. In addition, we have made the following significant discretionary changes:

- Tenant or Participant rent will be reviewed and increased if the amount of income increases between annual reexaminations by \$100 or more, or if an additional family member is being added to the household (adult or minor), or if the tenant or participant had reported no income (0 income) and receiving a utility reimbursement check. All income changes are required to be reported to the Jackson Metropolitan Housing Authority, the Housing Authority will determine if it meets the exemption from an interim reexamination or not.
- The Jackson Metropolitan Housing Authority will be implementing a Pet Policy for all developments upon approval of this plan.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$274,249.00

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment Attachment B

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to next component ; if “yes”, complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA’s estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____
- C. ☐ Yes ☒ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment (File name) Attachment C
3. In what manner did the PHA address those comments? (select all that apply)
 - ☒ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 - ☐ Yes ☐ No: below or
 - ☒ Yes ☐ No: at the end of the RAB Comments in Attachment C.
 - ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
 - ☐ Other: (list below)

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: State of Ohio
2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)
 - ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
 - ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
 - ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
 - ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
 - ☐ Other: (list below)
3. PHA Requests for support from the Consolidated Plan Agency
 - ☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:
4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: None

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

A substantial deviation from the 5-year Plan occurs when the Board of Commissioners decides that it wants to change the mission statement, goals or objectives of the 5-year plan.

B. Significant Amendment or Modification to the Annual Plan:

Significant amendments or modifications to the Annual Plan are defined as discretionary changes in the plans or policies of the housing authority that fundamentally change the plans of the agency and which require formal approval of the Board of Commissioners.

Attachment A:
Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	<p>Public housing rent determination policies, including the method for setting public housing flat rents <input type="checkbox"/> check here if included in the public housing A & O Policy</p> <p>The Jackson Metropolitan Housing Authority will retain it's ceiling rents instead of flat rents for a period of three years from October 21, 1999. After this three year period, the Jackson Metropolitan Housing Authority must adjust the ceiling rents to the same level as flat rents as outlined in the <i>April 30, 1999 Federal Register – Changes to Admission and Occupancy Requirements in the Public Housing and Section 8 Housing Assistance Programs.</i></p>	Annual Plan: Rent Determination
X	<p>Schedule of flat rents offered at each public housing development <input type="checkbox"/> check here if included in the public housing A & O Policy</p> <p>The Jackson Metropolitan Housing Authority will retain it's ceiling rents instead of flat rents for a period of three years from October 21, 1999. After this three year period, the Jackson Metropolitan Housing Authority must adjust the ceiling rents to the same level as flat rents as outlined in the <i>April 30, 1999 Federal Register – Changes to Admission and Occupancy Requirements in the Public Housing and Section 8 Housing Assistance Programs.</i></p>	Annual Plan: Rent Determination
X	<p>Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan</p>	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Results of latest Section 8 Management Assessment System (SEMAP) The Jackson Metropolitan Housing Authority has on file the certification submitted to HUD as required by regulation. At this time the Jackson Metropolitan Housing Authority has only received the results of SEMAP verbally from the HUD Field Office.	Annual Plan: Management and Operations
X	Any required policies governing any Section 8 special housing types <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Attachment B

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number CIAP Capital Fund Program Grant No: OH16PO4050101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	35,249.00			
3	1408 Management Improvements				
4	1410 Administration	20,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,000.00			
8	1440 Site Acquisition				
9	1450 Site Improvement	8,000.00			
10	1460 Dwelling Structures	181,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	15,000.00			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	274,249.00			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number CIAP Capital Fund Program Grant No: OH16PO4050101 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)

Part II: Supporting Pages

PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16PO4050101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
Project 001	Carpet	1460		2,000.00				
	Replace Furnace/A/C	1460		20,000.00				
	Sidewalk/Patio Repair	1450		5,000.00				
	Bathroom Remodeling	1460		1,000.00				
	Replace Furnace Doors	1460		1,000.00				
	Closet Door Replacement	1460		6,000.00				
	Window Replacement/Repair	1460		10,000.00				
Project 002	Carpet	1460		12,000.00				
	Replace Furnace/A/C	1460		18,000.00				
	Sidewalk/Patio Repair	1450		3,000.00				
	Bathroom Remodeling	1460		1,000.00				
	Replace Furnace Doors	1460		1,000.00				
	Closet Door Replacement	1460		4,000.00				
	Window Replacement/Repair	1460		5,000.00				
Project 003	Replace Carpet	1460		10,000.00				
	Replace Boiler	1460		90,000.00				
PHA- WIDE	Operations	1406		35,249.00				
	Admin. Salaries	1410		20,000.00				
	Architect	1430		15,000.00				
	Vehicle Replacement	1475		15,000.00				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: Jackson Metropolitan Housing Authority			Grant Type and Number Capital Fund Program No: OH16PO4050101 Replacement Housing Factor No:			Federal FY of Grant: 2001	
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	9/30/03			9/30/04			
Project 001	9/30/03			9/30/04			
Project 002	9/30/03			9/30/04			
Project 003	9/30/03			9/30/04			

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Jackson MHA				<input type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: 2002 PHA FY: 2002	Work Statement for Year 3 FFY Grant: 2003 PHA FY: 2003	Work Statement for Year 4 FFY Grant: 2004 PHA FY: 2004	Work Statement for Year 5 FFY Grant: 2005 PHA FY: 2005
HA -Wide	Annual Statement	85,249.00	70,249.00	85,249.00	70,249.00
Project 001		45,000.00	60,000.00	45,000.00	60,000.00
Project 002		44,000.00	44,000.00	44,000.00	44,000.00
Project 003		100,000.00	100,000.00	100,000.00	100,000.00
CFP Funds Listed for 5-year planning		274,249.00	274,249.00	274,249.00	274,249.00
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u> 2 </u> FFY Grant: 2002 PHA FY: 2002			Activities for Year: <u> 3 </u> FFY Grant: PHA FY:		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See	Project 001	Carpet	2,000.00	Project 001	Carpet	2,000.00
Annual		Replace Furnaces/A/C	20,000.00		Replace Furnaces/A/C	35,000.00
Statement		Concrete Repair	5,000.00		Concrete Repair	5,000.00
		Bathroom Remodeling	1,000.00		Bathroom Remodeling	1,000.00
		Replace Furnace Doors	1,000.00		Replace Furnace Doors	1,000.00
		Replacement Closets	6,000.00		Replacement Closets	6,000.00
		Window replacement	10,000.00		Window replacement	10,000.00
	Project 002	Carpet	12,000.00	Project 002	Carpet	12,000.00
		Replace Furnaces/A/C	18,000.00		Replace Furnaces/A/C	18,000.00
		Concrete Repair	3,000.00		Concrete Repair	3,000.00
		Bathroom Remodeling	1,000.00		Bathroom Remodeling	1,000.00
		Replace Furnace Doors	1,000.00		Replace Furnace Doors	1,000.00
		Replacement Closets	4,000.00		Replacement Closets	4,000.00
		Window replacement	5,000.00		Window replacement	5,000.00
	Project 003	Carpet	10,000.00	Project 003	Carpet	2,000.00
		Replace Air Handler	90,000.00		Replace Generator	90,000.00
	PHA -Wide	Operations	35,249.00	PHA - Wide	Operations	35,249.00
		Admin. Salaries	20,000.00		Admin. Salaries	20,000.00
		Architect	15,000.00		Architect	15,000.00
		Vehicle Replacement	15,000.00			
Total CFP Estimated Cost			\$274,249.00			\$274,249.00

Capital Fund Program Five-Year Action Plan
Part II: Supporting Pages—Work Activities

Activities for Year : <u>4</u> FFY Grant: 2004 PHA FY: 2004			Activities for Year: <u>5</u> FFY Grant: 2005 PHA FY: 2005		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
Project 001	Carpet	2,000.00	Project 001	Carpet	2,000.00
	Replace Furnaces/A/C	20,000.00		Replace Furnaces/A/C	35,000.00
	Concrete Repair	5,000.00		Concrete Repair	5,000.00
	Bathroom Remodeling	1,000.00		Bathroom Remodeling	1,000.00
	Replace Furnace Doors	1,000.00		Replace Furnace Doors	1,000.00
	Replacement Closets	6,000.00		Replacement Closets	6,000.00
	Window replacement	10,000.00		Window replacement	10,000.00
Project 002	Carpet	12,000.00	Project 002	Carpet	12,000.00
	Replace Furnaces/A/C	18,000.00		Replace Furnaces/A/C	18,000.00
	Concrete Repair	3,000.00		Concrete Repair	3,000.00
	Bathroom Remodeling	1,000.00		Bathroom Remodeling	1,000.00
	Replace Furnace Doors	1,000.00		Replace Furnace Doors	1,000.00
	Replacement Closets	4,000.00		Replacement Closets	4,000.00
	Window replacement	5,000.00		Window replacement	5,000.00
Project 003	Carpet	2,000.00	Project 003	Carpet	2,000.00
	Replace Compactor	70,000.00		Replace Room Furnace	50,000.00
	Replace Circulate Pump	20,000.00		Security Upgrade	20,000.00
PHA - Wide	Operations	35,249.00	PHA - Wide	Operations	35,249.00
	Admin. Salaries	20,000.00		Admin. Salaries	20,000.00
	Architect	15,000.00		Architect	15,000.00
	Vehicle Replacement	15,000.00			
Total CFP Estimated Cost		\$274,249.00			\$274,249.00

Attachment C
Comments of Resident Advisory Board
Jackson Metropolitan Response

Comments received at the Resident Advisory Board meeting held on April 13, 2001:

Pet Policy Suggestions

- Pet deposit
- Limit the height and weight of pet
- Pets inside only, outside on leash only
- No violent dogs
- Pictures of pets
- License and shot record
- Increased inspection schedule

Modernization Funding

- New windows
- Ceiling fans
- Closet doors replaced
- Storage bins
- Sewer odor problem at Bundy
- Kids playground – swing set
- Central air

Miscellaneous Suggestions

- People to pick up their trash
- Speed limit signs
- Rats near building 8
- Pick up trash along the fence on the left side of Bundy
- Curfew be put in place for summer
- Community service workers could pick up trash

Comments received at the Resident Advisory Board meeting held on April 19, 2001

Modernization Funding

- Ceiling fans
- Installing new furnaces and air conditioning at Fairview Terrace and Bundy Heights.

In reviewing the funding amount the RAB was in general agreement that there were not enough funds to complete all the work items. It was suggested that in the case of

replacing furnaces and air conditioning at Fairview and Bundy be done a little each year, as residents moved from units.

Operational Funds Targeted for Resident Purposes

- The RAB then discussed operational funds from the Public Housing budget that was to be used for residents. The Executive Director noted the funding started from October 1, 2001. However, the \$25.00 per unit mentioned would be reduced based on how Jackson Metropolitan Housing Authority was funded. He noted that Jackson Metropolitan Housing Authority had never been funded at 100% of what Jackson Metropolitan Housing Authority qualified, and he believed this year would be funded at 98%. The RAB discussed the use of a possible \$4,050.00. They reviewed information on items the money could be spent for. It was suggested a possible use of the money to be used for fire extinguishers for each unit, and training for their use. There was also some discussion of using some of the funds for training of the RAB.

Safety Concerns

- One resident discussed some safety concerns. One suggestion was moving the kitchen away from the front doors in units with only one exit. The concern was that based on the location of the majority of the kitchens, a fire in that area, which is most likely, would block a person from exiting.
- A second item was having people who were in wheelchairs and limited mobility live on the first or courtyard floor. It was noted that since the elevators shut off during a fire, some people that are in wheelchairs on high floors or limited mobility have a difficult if not impossible task to leave the building down the stairwells.
- A third item of concern was how the Cambrian bathroom doors opened and closed. Concern was expressed that if someone had the door closed and fell near the door, it would be impossible to get to the person, since the door closed from the inside and the hinges were not accessible to be removed. The Executive Director noted the fire department had specific tools they could use to cut the door away, if not in half.
- It was suggested signs for parking to read residents only.

Comments received at the Resident Advisory Board meeting held on May 1, 2001:

The Resident Advisory Board agreed to finalize a number of issues that had been discussed at the two previous meetings. Minutes were distributed from the previous meetings.

Additional comments were made as follows:

- Playground equipment in front of building #9
- A problem with the curb at the entrance of Fairview Terrace. The problem was the width of the entrance. The Executive Director noted that it had been considered, but that it was not a priority at this time.
- A problem with drugs was discussed, and some issues with the Wellston Police with regard to their telling residents that Jackson Metropolitan Housing Authority was private property. The Executive Director suggested asking the Mayor of Wellston to attend the next meeting. Everyone agreed to the suggestion, and the Executive Director advised he would call the Mayor.

The Resident Advisory Board then reviewed a few items in an attempt to finalize them for the annual and five-year plan. The Resident Advisory Board agreed to the following:

Pet Policy

- Pets inside only
- One pet only if dog or cat, if birds two maximum, if fish 10 gallon aquarium
- Picture of animal if cat or dog
- Pet deposit refundable
- Annual pet fee nonrefundable
- No violent breeds of dogs
- No exotic pets like snakes
- Height and weight restrictions on dogs and cats 15" high, 15-20 pounds dog
- Dogs and cats need to be licensed, provide shot records, spayed or neutered
- Increased inspection for units with pets, at least once per quarter
- If pet is outside must be on a leash.

Community Service

- The Resident Advisory Board agreed to continue the work requirement for residents to be up to the resident to show proof they had volunteered for their work requirements outside of the Jackson Metropolitan Housing Authority.

Modernization Funding

- The Resident Advisory Board put priority on new furnaces and adding air conditioning to Fairview and Bundy Heights, plus replacement of the aging air conditioning and heating system at the Cambrian.

Operational Funds Targeted for Resident Purposes

- The Resident Advisory Board tentatively agreed to spend funds for the residents from the Resident Advisory Board for training, and purchase of fire extinguishers.

Member of the Governing Board

- The Executive Director had discussion with the Resident Advisory Board concerning the appointment of one of the Resident Advisory Board members to the Board of Commissioners. All Resident Advisory Board members indicated interest in being appointed.

Comments received at the Resident Advisory Board meeting held on May 8, 2001:

The Mayor of Wellston was present at the Resident Advisory meeting. The following was discussed:

- The Wellston Police had recently indicated to some residents, that Fairview Terrace and Bundy Heights were private property, and the Housing Authority should address most items. The Mayor noted this was buss, and this response had been discussed recently at a City Council meeting. It appeared two police dispatchers were using the private property issue, and some action was being taken toward the dispatchers.
- Screening of potential residents was discussed. The Mayor advised that the Wellston Police was now cooperating to help screen potential residents. For 25 cents they would copy record, and for items that would require research it would be \$8.00 per hour.
- A couple incidents were discussed that the Mayor took notes on, and promised to get back to the Resident Advisory Board.
- The Executive Director suggested the Wellston Police not use names of people over the radio that complained. He gave a few examples.
- Members of the Resident Advisory Board asked about meeting with the Wellston Police and Fire Department. Possibilities included fingerprinting children, training on use of fire extinguisher, and safety for tenants. The Mayor advised that a grant they had received required such activities and he would work with the Jackson Metropolitan Housing Authority and the Resident Advisory Board.

Jackson Metropolitan Housing Authority Action

The Pet Policy suggestions were adopted. The Capital Funds budget reflects the wishes of the residents. The operational budget suggestions will also be implemented.

Attachment D

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number CIAP Capital Fund Program Grant No: OH16PO4090899 Replacement Housing Factor Grant No:			Federal FY of Grant: 1999
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: #3) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	20,000.00	72,077.58	72,077.58	28,400.00
3	1408 Management Improvements	0	2,619.61	2,619.61	2,619.61
4	1410 Administration	12,300.00	25,217.68		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,000.00	2,000.00	2,000.00	0
8	1440 Site Acquisition				
9	1450 Site Improvement	95,000.00	2,400.00	2,400.00	2,400.00
10	1460 Dwelling Structures	102,800.00	179,785.13	179,785.13	106,941.81
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	25,000.00	0		
13	1475 Nondwelling Equipment	14,000.00	0		
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	284,100.00	284,100.00	284,100.00	165,579.10

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary**

PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number CIAP Capital Fund Program Grant No: OH16PO4090899 Replacement Housing Factor Grant No:		Federal FY of Grant: 1999	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: #3) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 3/31/01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16PO4090899 Replacement Housing Factor Grant No:				Federal FY of Grant: 1999		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA-Wide	Operations	1406		20,000.00	72,077.58	73,077.58	28,400.00	
	QHWRA Consultant	1408		0	2,619.61	2,619.61	2,619.61	
	Administrative Cost/Legal Notices	1410		2,300.00	217.68	217.68	217.68	
	Administrative Salaries	1410		10,000.00	25,000.00	25,000.00	25,000.00	
	Architect	1430		15,000.00	2,000.00	2,000.00	0	
Project 001	Metal Flashing/Windows	1460		15,000.00	6,910.00	6,910.00	6,910.00	
	Replace Carpet	1460		0	3,000.00	3,000.00	3,000.00	
	Concrete Ramp/ADA/504	1450		0	2,400.00	2,400.00	2,400.00	
	Living Room Window Replacement	1460		35,000.00	0	0	0	
	Stucco	1460		10,000.00	0	0	0	
	Replace Railroad Tile/With Concrete	1450		25,000.00	0	0	0	
	Replace Medicine Cabinet	1460		6,400.00	0	0	0	
	Replace Sliding Closet Doors	1460		20,000.00	0	0	0	
Project 002	Replace Carpet	1460		0	13,500.00	13,500.00	13,500.00	
	Replace Riding Mower	1475		14,000.00	0	0	0	
	Replace Medicine Cabinet	1460		6,400.00	0	0	0	
	Garage/Equipment Storage	1470		25,000.00	0	0	0	
	Stucco Repair	1460		10,000.00	0	0	0	
	Replace/Repair Paving	1450		70,000.00	0	0	0	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

[illegible]

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Jackson Metropolitan Housing Authority			Grant Type and Number Capital Fund Program No: OH16PO4090899 Replacement Housing Factor No:				Federal FY of Grant: 1999
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
Project 001	9/30/01	1/01/01	1/01/01	9/30/02	1/01/01	1/01/01	
Project 002	9/30/01	1/01/01	1/01/01	9/30/02	1/01/01	1/01/01	
Project 003	9/30/01	6/01/01	4/16/01	9/30/02	6/01/01		
PHA – Wide	9/30/01	6/01/01	4/16/01	9/30/02	5/30/01		

Attachment E

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number CIAP Capital Fund Program Grant No: OH16PO4050100 Replacement Housing Factor Grant No:			Federal FY of Grant: 2000
X <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	30,863.00	0	0	0
3	1408 Management Improvements				
4	1410 Administration	20,000.00	0	0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	15,000.00	0	0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	14,000.00	0	0	0
10	1460 Dwelling Structures	190,000.00	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				

Annual Statement/Performance and Evaluation Report**Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary**

PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number CIAP Capital Fund Program Grant No: OH16PO4050100 Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
X <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
21	Amount of Annual Grant: (sum of lines 2 – 20)	269,863.00	0	0	0
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Jackson Metropolitan Housing Authority		Grant Type and Number Capital Fund Program Grant No: OH16PO4050100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	1406		30,863.00				
	Administrative Salaries	1410		20,000.00				
	Architect	1430		15,000.00				
Project 001	Carpet	1460		5,000.00				
	Replace Furnace/A/C	1460		12,500.00				
	Sidewalk/Patio Repair	1450		7,500.00				
	Bathroom Remodeling	1460		10,000.00				
	Replace Furnace Doors	1460		2,500.00				
	Closet Door Replacement	1460		5,000.00				
	Window Replacement/Repair	1460		7,500.00				
Project 002	Carpet	1460		10,000.00				
	Replace Furnace/A/C	1460		12,500.00				
	Sidewalk/Patio Repair	1450		2,500.00				
	Bathroom Remodeling	1460		10,000.00				
	Replace Furnace Doors	1460		2,500.00				
	Closet Door Replacement	1460		1,000.00				
	Window Replacement/Repair	1460		5,000.00				
	Lift Station Pump	1450		4,000.00				

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages**

[illegible]

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

PHA Name: Jackson Metropolitan Housing Authority			Grant Type and Number Capital Fund Program No: OH16PO4050100 Replacement Housing Factor No:				Federal FY of Grant: 2000
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
PHA Wide	9/30/02			9/30/03			
Project 001	9/30/02			9/30/03			
Project 002	9/30/02			9/30/03			
Project 003	9/30/02			9/30/03			

Required Attachment __F__: Resident Member on the PHA Governing Board

1. ☐ Yes ☒ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board: See Below

B. How was the resident board member selected: (select one)?

- ☐ Elected
☒ Appointed

C. The term of appointment is (include the date term expires): July 1, 2001 through June 30, 2006

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☒ Other (explain):

B. Date of next term expiration of a governing board member:

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Board of Commissioners

Required Attachment __G____: Membership of the Resident Advisory Board or Boards

- i. List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Kimberly Howard
Bundy Heights
300 Grady Lane #60
Wellston, Ohio 45692

Timothy Shard
Fairview Terrace
249 W. 13th Street #51
Wellston, Ohio 45692

Jeannie Mallow
Cabrian
254 East Main Street #3
Jackson, Ohio 45640

John Morgan
Cabrian
254 East Main Street #103
Jackson, Ohio 45640

Alice Beatty
4 East Broadway #215
Wellston, Ohio 45692